| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004  |  |   |                  |   |                    |            |                        | Application or Docket Number |                    |                        |  |
|--|--|---|------------------|---|--------------------|------------|------------------------|------------------------------|--------------------|------------------------|--|
|  |  | CLAIMS A                                  | (Column 1) (C    |   | Column 2)          | SMALL EI   | NTITY                  | OR                           | · OTHER            |                        |  |
| TOTAL CLAIMS   |  |   |                  |   |                    | RATE       | FEE                    |                              | RATE               | FEE                    |  |
| FOR  |  |   | NUMBER FILED NUM |   | MBER EXTRA         | BASIC FEE  |                        | OR                           | BASIC FEE          | 950                    |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | /9 minus 20 = .  |   |                    | X\$9=      |                        | OR                           | X \$ 18 =          | 7                      |  |
| INDEPENDENT CLAIMS   |  |   | / "              | ilnus 3 = .                                 |                    | X \$ 44 =  |                        | OR                           | X \$ 88 =          |                        |  |
| MUL  | TIPLE DEPEN                                    | DENT CLAIM P                              | RESENT           |   |                    | + \$ 150 = |                        | OR                           | + \$ 300 =         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                  |   |                    | TOTAL      |                        | OR                           | TOTAL              | 450                    |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |                  |   |                    | SMALL      | ENTITY                 | OR                           | OTHER<br>SMALL     |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA   | RATE       | ADDI-<br>TIONAL<br>FEE |                              | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | . 19                                      | Minus            | **  | =                  | X\$9=      |                        | OR                           | X \$ 18 =          | 4                      |  |
| AMEN   | Independent                                    | · /                                       | Minus            | ***   | =                  | X \$ 44 =  |                        | OR                           | X \$ 88 =          |                        |  |
|  | FIRST PRESE                                    | NTATION OF I                              | MULTIPLE DEP     | ENDENT CLAIN                                |                    | + \$ 150 = |                        | OR                           | + \$ 300 =         |                        |  |
|  |  |   |                  |   |                    |            |                        | OR                           | TOTAL<br>ADDIT FFF |                        |  |
|  | 11   | (Column 1)                                | r                | (Column 2)                                  | (Column 3)         |            | 4001                   | 1                            |                    |                        |  |
| AMENDMENT 8  | 12707  | REMAINING<br>AFTER<br>AMENDMENT           |                  | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA   | RATE .     | ADDI-<br>TIONAL<br>FEE |                              | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | .22                                       | Minus            | - 20  | = 2                | X \$ 9 =   |                        | OR                           | X\$# <del>=</del>  | 100                    |  |
|  | Independent                                    | • /                                       | Minus            | <del>"</del> 3                              | =                  | X \$ 44 =  |                        | OR                           | X \$ 88 =          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |   |                    | + \$ 150 = |                        | OR                           | + \$ 300 =         |                        |  |
|  |  | TOTAL<br>ADDIT FFF                        |                  | OR  | TOTAL<br>ADDIT FFF |            |                        |                              |                    |                        |  |
|  | <del></del>                                    | (Column 1)                                |                  | (Column 2)                                  | (Column 3)         |            |                        |                              |                    |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA   | RATE       | ADDI-<br>TIONAL<br>FEE |                              | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus            | **  | =                  | X \$ 9 =   |                        | OR                           | X \$ 18 =          |                        |  |
| AMEN   | Independent                                    | •   | Minus            | ***   | =                  | X \$ 44 =  |                        | OR                           | X \$ 88 =          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |   |                    | + \$ 150 = |                        | OR                           | + \$ 300 =         |                        |  |
| TOT/ ADDIT  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                  |   |                    |            |                        | OR                           | TOTAL<br>ADDIT FFF |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |   |                    |            |                        |                              |                    |                        |  |